

PART B - FEE(S) TRANSMITTAL

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51501 7590 05/14/2008

WEAVER AUSTIN VILLENEUVE & SAMPSON LLP
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Valerie Olsen	(Depositor's name)
/Valerie Olsen/	(Signature)
August 14, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/719,218	11/20/2003	Wen-Chou Vincent Wang	ALTRP100/A1198	3208
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TITLE OF INVENTION: STRUCTURE, MATERIAL, AND DESIGN FOR ASSEMBLING A LOW-K SI DIE TO ACHIEVE AN INDUSTRIAL GRADE RELIABILITY WIRE BONDING PACKAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$1440	08/14/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAO, SHRINIVAS H	2814	257-790000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1 Weaver Austin
2 Villeneuve & Sampson LLP
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE <u>Altera Corporation</u>	(B) RESIDENCE: (CITY and STATE OR COUNTRY) <u>San Jose, CA</u>
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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 504480 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Cindy H. Shu/

Date August 14, 2008

Typed or printed name Cindy H. Shu

Registration No. 48,721

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